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Letter to the Editors

Comment on ''Cryptococcal antigenemia among severely immunosuppressed HIV-infected adults in Uganda (Oyella et al. 2012)''

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The recent report on ''Prevalence and factors associated with cryptococcal antigenemia among severely immunosuppressed HIV-infected adults in Uganda'' is very interesting [1]. Oyella *et al*. concluded that ''Independent predictors of positive serum cryptococcal antigenemia were CD4+ T cell counts of less than 50 cells/mm, low body mass index, neck pain, signs of meningeal irritation, and a recent diagnosis of HIV infection'' [1]. This work is a cross sectional study, not a case-control study; hence, there might be some bias on assessment of risk factor. Indeed, many other factors might contribute to the cryptococcal antigenemia. Some identified factors (such as low CD4+ count and low body mass index) in this study are same as the other reports whereas many factors are totally different [2]. It is no doubt that concurrent conditions might contribute to severe infection, and this has not been completely investigated. Also, the quality control of the diagnostic test in this work should be discussed. The problem of false positive of the test kit has to be discussed [3]. Of interest, the false results can occur only if improper transportation is applied [4].

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References

1. Oyella J, Meya D, Bajunirwe F, Kamya MR. Prevalence and factors associated with cryptococcal antigenemia among severely immunosuppressed HIV-infected adults in Uganda: a cross-sectional study. J Int AIDS Soc. 2012;15:15.
2. Micol R, Lortholary O, Sar B, Laureillard D, Ngeth C, Dousset JP, et al. Prevalence, determinants of positivity, and clinical utility of cryptococcal antigenemia in Cambodian HIV-infected patients. J Acquir Immune Defic Syndr. 2007;45:555–9.
3. Patil SA, Katyayani S, Arvind N. Significance of antibody detection in the diagnosis of cryptococcal meningitis. J Immunoassay Immunochem. 2012;33:140–8.
4. Wilson DA, Sholtis M, Parshall S, Hall GS, Procop GW. False-positive cryptococcal antigen test associated with use of BBL Port-a-Cul transport vials. J Clin Microbiol. 2011;49:702–3.